



Issue Classification 	Application No.	Applicant(s)	
	10/607,863	VASSILIOU, EUSTATHIOS	
	Examiner	Art Unit	
	Flemming Saether	3677	

ISSUE CLASSIFICATION												
ORIGINAL				CROSS REFERENCE(S)								
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)							
411		173		411	182	112						
INTERNATIONAL CLASSIFICATION												
F	1	6	B	37/04								
				/								
				/								
				/								
				/								

(Assistant Examiner) (Date) <i>[Signature]</i> 9/21/04 (Legal Instruments Examiner) (Date)		<i>[Signature]</i> Flemming Saether Primary Examiner (Primary Examiner) 9-6-04 (Date)		Total Claims Allowed: 24 O.G. Print Claim(s) O.G. Print Fig. 1 20	
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<input type="checkbox"/> Claims renumbered in the same order as presented by applicant												<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
	1		31		61		91		121		151		181				
	2		32		62		92		122		152		182				
	3		33		63		93		123		153		183				
	4		34		64		94		124		154		184				
	5		35		65		95		125		155		185				
	6		36		66		96		126		156		186				
	7		37		67		97		127		157		187				
	8		38		68		98		128		158		188				
	9		39		69		99		129		159		189				
	10		40		70		100		130		160		190				
	11		41		71		101		131		161	1	191				
	12		42		72		102		132		162	2	192				
	13		43		73		103		133		163	6	193				
	14		44		74		104		134		164	3	194				
	15		45		75		105		135		165	8	195				
	16		46		76		106		136		166	9	196				
	17		47		77		107		137		167	12	197				
	18		48		78		108		138		168	5	198				
	19		49		79		109		139		169	7	199				
	20		50		80		110		140		170	4	200				
	21		51		81		111		141		171	11	201				
	22		52		82		112		142		172	10	202				
	23		53		83		113		143		173		203				
	24		54		84		114		144		174		204				
	25		55		85		115		145		175	13	205				
	26		56		86		116		146		176	14	206				
	27		57		87		117		147		177	18	207				
	28		58		88		118		148		178	15	208				
	29		59		89		119		149		179	20	209				
	30		60		90		120		150		180	21	210				

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(Assistant Examiner) (Date)				(Primary Examiner) (Date)				Total Claims Allowed:			
(Legal Instruments Examiner) (Date)								O.G. Print Claim(s)		O.G. Print Fig.	

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
24	211		241		271		301		331		361		391		420
17	212		242		272		302		332		362		392		
19	213		243		273		303		333		363		393		
16	214		244		274		304		334		364		394		
23	215		245		275		305		335		365		395		
22	216		246		276		306		336		366		396		
	217		247		277		307		337		367		397		
	218		248		278		308		338		368		398		
	219		249		279		309		339		369		399		
	220		250		280		310		340		370		400		
	221		251		281		311		341		371		401		
	222		252		282		312		342		372		402		
	223		253		283		313		343		373		403		
	224		254		284		314		344		374		404		
	225		255		285		315		345		375		405		
	226		256		286		316		346		376		406		
	227		257		287		317		347		377		407		
	228		258		288		318		348		378		408		
	229		259		289		319		349		379		409		
	230		260		290		320		350		380		410		
	231		261		291		321		351		381		411		
	232		262		292		322		352		382		412		
	233		263		293		323		353		383		413		
	234		264		294		324		354		384		414		
	235		265		295		325		355		385		415		
	236		266		296		326		356		386		416		
	237		267		297		327		357		387		417		
	238		268		298		328		358		388		418		
	239		269		299		329		359		389		419		
	240		270		300		330		360		390				